



Legendary Trails of North Dakota Nomination Application

Application Instructions

Please complete the following application to apply for designation as a Legendary Trail of North Dakota. Submit one hard copy of the completed application, along with any additional materials (e.g. letters of support, trail map, trail brochure, photos) to the State Trails Coordinator by October 1st. Questions regarding the nomination process can be directed to the State Trails Coordinator by calling (701) 328-5357 or email at parkrec@state.nd.us.

The application must be submitted by the trail managing agency, organization or individual officially responsible for permitting trail use. If the trail is managed by more than one entity, either one application with a statement of support from all managing entities, or individual applications from each trail managing entity may be submitted.

Applications should be addressed to:
North Dakota Parks and Recreation Department
Attn: Trails Coordinator
1600 East Century Avenue, Suite 3
Bismarck, ND 58503

General Information

Trail Name :
Trail Location :
County(ies):
Trail Managing Agency or Organization:
Trail Manager's Name:
Address:
City, State, Zip code:
Phone Number:
Fax Number
Email address:
Website address:

Trail Type

Please check all that apply.

- ☐ Biking
- ☐ Hiking
- ☐ Interpretive
- ☐ Equestrian
- ☐ Motorized
 - ☐ OHV
 - ☐ Snowmobile
- ☐ Water
- Other (Please list.)

Facilities along the Trail

Please indicate the **number** of these facilities that exist.

- | | |
|----------------------------|---|
| _____ Bench | _____ Restrooms |
| _____ Boat Launch | _____ Showers |
| _____ Cabin | _____ Signs: _____ Interpretive _____ Directional |
| _____ Camping Area | _____ Telephone |
| _____ Corral/Hitching Rail | _____ Trail Access Information |
| _____ Fire Ring/Grill | _____ Trailheads |
| _____ Historical Site | _____ Trash Disposal |
| _____ Parking | _____ Visitor Center |
| _____ Parking, Trailer | _____ Water, Non-Potable |
| _____ Picnic Area | _____ Water, Potable |
| _____ Public Shelter | _____ Other (Please list.) |
| _____ Resort/Ranch | |

Public Access

Trail length: _____ miles

Loop trail? ☐ Yes ☐ No

Lowest elevation: _____ feet

Highest elevation: _____ feet

Average width of tread or beaten path _____ inches

Minimum width of tread or beaten path _____ inches

Is user accessibility information available?

_____ Yes _____ No

If yes, in what format:

_____ trailhead signage _____ brochure _____ web site _____ other

Open Dates

☐ Open all year

☐ Open from _____

to _____

Times of Trail Operation

☐ Open 24 hours

☐ Open from _____ to _____

What Is Special about Your Trail?

Attach a descriptive narrative telling us why your trail should be designated as a LTND. Descriptions should include: The trail's State or regional significance as well as what other scenic, historic, cultural, and design qualities it has which separate it from other trails. (a minimum of 2 qualities required for eligibility).

Certification for Public Use

I hereby certify that: (1) I am duly authorized to represent the agency, organization or individual officially responsible for permitting trail use; (2) the trail is in existence and will be available for public use, to the best of my knowledge, for at least 10 consecutive years after designation; (3) the trail has been designed, constructed, and is maintained according to best management practices, in keeping with the use anticipated; (4) the trail will be maintained at a level consistent with its condition at the time of designation; and (5) all landowners, public or private, whose property the trail crosses, have been notified and have given their written consent to this application. If this trail becomes permanently closed to public use, we will immediately notify the State Trails Coordinator and North Dakota Parks and Recreation Department.

Applicant Signature: _____

Applicant Name and Title: _____

Organization Name: _____